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CONFIRMATION NO. 4637

|  |   |                                   |   |                                       |
|--|---|-----------------------------------|---|---------------------------------------|
| <b>SERIAL NUMBER</b><br>10/531,183   | <b>FILING OR 371(c) DATE</b><br>10/29/2005<br><b>RULE</b>   | <b>CLASS</b><br>385               | <b>GROUP ART UNIT</b><br>2874   | <b>ATTORNEY DOCKET NO.</b><br>LCX-020 |
| <b>APPLICANTS</b><br>Moti Margalit, Zichron Yaakov, ISRAEL;<br>Michael Yasin, Haifa, ISRAEL;<br>Meir Orenstein, Haifa, ISRAEL;   |   |                                   |   |                                       |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/IL03/00813 10/09/2003  |   |                                   |   |                                       |
| <b>** FOREIGN APPLICATIONS *****</b><br>ISRAEL 152195 10/09/2002   |   |                                   |   |                                       |
| <b>** SMALL ENTITY **</b>  |   |                                   |   |                                       |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature _____ Initials _____ |   | <b>STATE OR COUNTRY</b><br>ISRAEL | <b>SHEETS DRAWING</b><br>3  | <b>TOTAL CLAIMS</b><br>20             |
| <b>INDEPENDENT CLAIMS</b><br>3   |   |                                   |   |                                       |
| <b>ADDRESS</b><br>Lambda Crossing<br>Landon StarkIP<br>1700 Diagonal Road<br>Alexandria ,VA 22314-2866   |   |                                   |   |                                       |
| <b>TITLE</b><br>Optical filtering device and method  |   |                                   |   |                                       |
| <b>FILING FEE RECEIVED</b><br>515  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                       |